



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of

Donald C. WOOD et al.

Serial No.: 10/748,669

Filed: December 31, 2003

For: GOLF CLUB LENGTH FITTING SYSTEM

SUBMISSION OF ORIGINAL EXECUTED DECLARATION

Mail Stop MISSING PARTS  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

Sir:

The above-identified application was duly filed on December 31, 2003 without an executed Declaration. Accordingly, submitted herewith is a fully executed Declaration of the inventors. Attached is our check for \$130.00 to cover the payment of the fee in accordance with 37 CFR 1.16(e). Also attached is our check for \$40.00 to cover the payment for recording the executed Assignment. Also included in our check is the full filing fee for this application.

Entry of these documents should complete all of the filing formalities. Accordingly examination and allowance of the application in due course are respectfully solicited.

02/12/2004 MBERHE 00000144 10748669

01 FC:1001  
02 FC:1051

770.00 OP  
130.00 OP

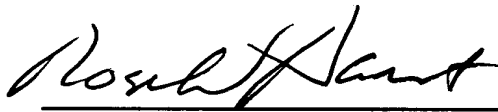
All correspondence should be sent to applicants' representative at the address indicated below.

The Commissioner is hereby authorized to charge any additional fee (or credit any overpayment) associated with this communication to Deposit Account No. 160331.

Respectfully submitted,

PARKHURST & WENDEL, L.L.P.

February 9, 2004  
Date

  
\_\_\_\_\_  
Roger W. Parkhurst  
Registration No. 25,177

Attorney Docket No. CLEV:629

PARKHURST & WENDEL, L.L.P.  
1421 Prince Street, Suite 210  
Alexandria, Virginia 22314-2805  
Telephone: (703) 739-0220

APPLICATION FOR UNITED STATES PATENT  
Declaration and Power of Attorney



As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; that

I verily believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: 1

GOLF CLUB LENGTH FITTING SYSTEM

described and claimed in the specification:

Check one

\*a. ☐ attached hereto.

b. ☒ filed on December 31, 2003 as Application Serial No. \_\_\_\_\_ and amended on \_\_\_\_\_;  
(if applicable)

I hereby state that I have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information of which I am aware which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a). Under Title 35 U.S. Code §119, the priority benefits of the following foreign application(s) filed within one year prior to this application are hereby claimed:

U.S. Provisional Patent Application No. 60/437,048 filed December 31, 2002

The following applications for patent or inventor's certificate on this invention were filed in countries foreign to the United States of American either (a) more than one year prior to this application, or (b) before the filing date of the above-named foreign priority application(s):

2 If there are no corresponding applications,  
insert "NONE".

NONE

I hereby appoint the following as my attorneys of record with full power of substitution and revocation to prosecute this application and to transact all business in the Patent Office:

Roger W. Parkhurst, Reg. No. 25,177; and/or Charles A. Wendel, Reg. No. 24,453.

**ALL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION SHOULD BE SENT TO  
PARKHURST & WENDEL, L.L.P., 1421 Prince Street, Suite 210, Alexandria, Virginia 22314-2805 Telephone:  
(703) 739-0220.**

I hereby declare that I have reviewed and understand the contents of this Declaration, and that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

3 Typewritten Full Name of  
Sole or First Inventor

Donald C. Wood

Given Name Middle Initial Family Name

\*4 Inventor's Signature



5 Date of Signature



01

06

04

Month

Day

Year

6 Residence

Temecula

California

U.S.A.

City

State or Province

Country

7 Citizenship

United States

8 Post Office Address 32082 Benabarre

(Insert complete mailing  
address, including country)

Temecula, California 92592 U.S.A.

\*This form may be executed only when attached to the specification (including claims) at the end thereof if Box a. is checked.

\*\*Note to the Inventor. Please sign name on line 4 exactly as it appears in line 3 and insert the actual date of signing on line 5.

IF THERE IS MORE THAN ONE INVENTOR USE PAGE 2 AND PLACE AN "X" HERE ☒

**PAGE 2 OF U.S.A. DECLARATION FORM**  
**(Discard this page in a sole inventor application)**

3 Typewritten Full Name of  
Second Joint Inventor (if any)

Andrew	R	Rothman
Given Name	Middle Initial	Family Name

\*4 Inventor's Signature

Andrew Rothman

5 Date of Signature

2      5      04  
Month      Day      Year

6 Residence

Costa Mesa	California	U.S.A.
City	State or Province	Country

7 Citizenship

United States

8 Post Office Address  
(Insert complete mailing  
address, including country)

3206 Dakota Avenue  
Costa Mesa, California 92626 U.S.A.

3 Typewritten Full Name of  
Third Joint Inventor (if any)

Given Name	Middle Initial	Family Name
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\*4 Inventor's Signature

5 Date of Signature

Month	Day	Year
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6 Residence

City	State or Province	Country
------	-------------------	---------

7 Citizenship

8 Post Office Address  
(Insert complete mailing  
address, including country)

3 Typewritten Full Name of  
Fourth Joint Inventor (if any)

Given Name	Middle Initial	Family Name
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\*4 Inventor's Signature

5 Date of Signature

Month	Day	Year
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6 Residence

City	State or Province	Country
------	-------------------	---------

7 Citizenship

8 Post Office Address  
(Insert complete mailing  
address, including country)

3 Typewritten Full Name of  
Fifth Joint Inventor (if any)

Given Name	Middle Initial	Family Name
------------	----------------	-------------

\*4 Inventor's Signature

5 Date of Signature

Month	Day	Year
-------	-----	------

6 Residence

City	State or Province	Country
------	-------------------	---------

7 Citizenship

8 Post Office Address  
(Insert complete mailing  
address, including country)

\*Note to Inventors: Please sign name on line 4 exactly as it appears in line 3 and insert the actual date of signing on line 5.

\*\*This form may be executed only when attached to the first page of the Declaration and Power of Attorney form and the specification (including claims) of the application to which it pertains.